

Thinking Pastor's Guide to using the Diagnostic Criteria Alcohol/Drug Abuse from the **DSM5**

Introduction:

Many individuals around the world first turn to their Pastor or a Christian Counselor to help when they may be struggling with the use of alcohol, drugs or gambling issues. The following material is adapted from the **DSM5** (published by the APA 2013).

DSM 5 ... is a combined work of Psychologists around the country, to develop a unified method of diagnosis and treating Mental Illness that includes Substance Abuse.

Under the section a Brief History ... The APA first published a predecessor of the DSM in 1844, as a statistical classification of institutionalized mental patients. It was designed to improve communication about the types of patients cared for in these hospitals. This forerunner to the DSM also was used as a component of the full U.S. census. After World War II, the DSM evolved through four major editions into a diagnostic classification system for psychiatrists, other physicians, and other mental health professionals. It described the essential features of the full range of mental disorders. The current edition, DSM-5, builds on the goal of its predecessors (most recently, DSM-IV-TR, or Text Revision, published in 2000) of providing guidelines for diagnoses that can assist in treatment and management decisions. ¹

Things to keep in mind as you use this material:

¹ Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Arlington, VA, American Psychiatric Association, 2013

- This doesn't give you permission or license to diagnose outside your scope of practice.
- Referrals are not a sin; they help the individual get the appropriate help. So, refer when needed (don't assume that you have all the answers).
- It is unethical to suggest that anyone stops taking a medication until they have spoken with their Medical or Psychiatric Doctor.

Essentially, a substance use disorder consists of a cluster of cognitive, behavioral, and physiological symptoms indicating that the individual continues using the substance despite compelling reasons not to.

Some Quotes about Alcoholism and Drug addiction:

All excess is ill, but drunkenness is of the worst sort. It spoils health, dismounts the mind, and unmans men. It reveals secrets, is quarrelsome, lascivious, impudent, dangerous and bad. -William Penn

Some Bible verses that give example of these symptoms are:

Proverbs 20:1 -

Wine [is] a mocker, strong drink [is] raging: and whosoever is deceived thereby is not wise.

Proverbs 23: 29-35

29 Who hath woe? Who hath sorrow? who hath contentions? who hath babbling? who hath wounds without cause? who hath redness of eyes? 30 They that tarry long at the wine; they that go to seek mixed wine. 31 Look not thou upon the wine when it is red, when it giveth his colour in the cup, [when] it moveth itself aright. 32 At the last it biteth like a serpent, and stingeth like an adder. 33 Thine eyes shall behold strange women, and thine heart shall utter perverse things. 34 Yea, thou shalt be as he that lieth down in the midst of the sea, or as he that lieth upon the top of a mast. 35 They have stricken me, [shalt thou say, and] I was not sick; they have beaten me, [and] I felt [it] not: when shall I awake? I will seek it yet again.

Check list for DSM 5

	Criteria	Alcohol	Cannabis/ Marijuana	Cocaine / Crack	Opiate/ Heroin	Amphetamin e/ Speed	Sedative s/ Downers	Inhala nt	Gamblin g
1	Continuing to use alcohol/drug despite negative personal consequences								
2	Repeatedly unable to carry out major obligations at work, school, or home due to alcohol/drug use								
3	Recurrent use of alcohol/drug in physically hazardous situations								
4	Continued use despite persistent or recurring social or interpersonal problems caused or made worse by alcohol/drug use								
5	Tolerance as defined by either a need for markedly increased amounts to achieve intoxication or desired effect or markedly diminished effect with continued use of the same amount								
6	Withdrawal manifesting as either characteristic syndrome or the substance is used to avoid withdrawal								
7	Using greater amounts or using								

	over a longer time period than intended								
8	Persistent desire or unsuccessful efforts to cut down or control alcohol/drug use								
9	Spending a lot of time obtaining, using, or recovering from using alcohol/drug.								
10	Stopping or reducing important social, occupational, or recreational activities due to alcohol/drug use								
11	Consistent use of alcohol/drug despite acknowledgment of persistent or recurrent physical or psychological difficulties from using alcohol/drugs.								
12	Craving or a strong desire to use alcohol/drugs (*Note - This is a new criterion added since the DSM-IV-TR)								

In order to be diagnosed with Substance Use Disorder or Addiction:
The patient must meet at least two of the twelve criteria for the diagnosis. The DSM5 also includes Gambling as a part of this criterion.

The criteria are very similar to those outlined in DSM-IV for abuse and dependence combined.

Two or Three of the criteria indicates mild substance use disorder,

Four or five ... criteria indicates moderate use,

Six or more ... indicates severe use

Treatment:

- An open and willing discussion of who we are in Christ and how that personal relationship with Him gives us a sense of success in remaining sober.
- Recommendation of 12-step or Christian-based Recovery Programs: Could include by not limited to:
 - o Alcohol Anonymous, Cocaine Anonymous, Narcotics Anonymous, etc.
 - o Celebrate recovery, Alcohol Victorious, etc.
 - o Obtaining a sponsor or mentor from one of the above organizations.
- One-to-one counseling addressing the reasons for use and the tools for remaining sober.
- Family counseling, if appropriate, to help re-establish the relationships within the home.
- A referral, when needed, to help the individual obtain help.